

L18000138442

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H180001710973)))



H180001710973ABC1

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To: Division of Corporations
Fax Number : (850) 617-6381

From: Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
Phone : (614) 280-3338
Fax Number : (954) 202-0845

18 JUN -6 PM 2:25

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

RECEIVED
2018 JUN -6 PM 1:09
DIVISION OF CORPORATIONS
COMMERCIAL
REGISTRATION SERVICES

FLORIDA LIMITED LIABILITY CO.
1327 S. Orange Avenue, LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$125.00

C RICO
JUN 06 2018

Electronic Filing Menu

Corporate Filing Menu

Help

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

1327 S. Orange Avenue, LLC

(Must contain the words "Limited Liability Company," "L.L.C.," or "LLC.")

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:22 S. Links Avenue, Suite 300
Sarasota, FL 34236Mailing Address:22 S. Links Avenue, Suite 300
Sarasota, FL 34236

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

The name and the Florida street address of the registered agent are:

Thomas Luzier, Esq.

Name

22 S. Links Avenue, Suite 300Florida street address (P.O. Box **NOT** acceptable)Sarasota

City

FL

State

34236

Zip

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S.



 Registered Agent's Signature (REQUIRED)

(CONTINUED)

 FILED
 SECRETARY OF STATE
 DIVISION OF CORPORATIONS
 18 JUN - 6 PM 2:25

The name and address of each person authorized to manage and control the Limited Liability Company:

Sarasota, FL 34236

\$ 5.00 Certificate of Status (Optional)